**DOCKET NO.:** 2007-1431-AIR-E **TCEQ ID:** RN102553955 **CASE NO.:** 34613

RESPONDENT NAME: Targa North Texas LP

| ORDER TYPE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                            |                                          |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|------------------------------------------|--|--|--|
| 1660 AGREED ORDER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | X FINDINGS AGREED ORDER                                    | FINDINGS ORDER FOLLOWING<br>SOAH HEARING |  |  |  |
| FINDINGS DEFAULT ORDER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | _SHUTDOWN ORDERIMMINENT AND SUBSTANTIAL ENDANGERMENT ORDER |                                          |  |  |  |
| _AMENDED ORDEREMERGENCY ORDER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                            |                                          |  |  |  |
| CASE TYPE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                            |                                          |  |  |  |
| X_AIRMULTI-MEDIA (check all that apply)INDUSTRIAL AND HAZARDOUS WASTE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                            |                                          |  |  |  |
| PUBLIC WATER SUPPLY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | PETROLEUM STORAGE TANKS                                    | OCCUPATIONAL CERTIFICATION               |  |  |  |
| WATER QUALITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | SEWAGE SLUDGE                                              | UNDERGROUND INJECTION CONTROL            |  |  |  |
| MUNICIPAL SOLID WASTE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | RADIOACTIVE WASTE                                          | DRY CLEANER REGISTRATION                 |  |  |  |
| SITE WHERE VIOLATION(S) OCCURRED: Millers Bend Compressor Station, 0.5 mile west of Miller Bend Road, 5.3 miles south of Highway 380, Young County  TYPE OF OPERATION: Natural gas compressor station  SMALL BUSINESS: YesX No  OTHER SIGNIFICANT MATTERS: There are no complaints. There is no record of additional pending enforcement actions regarding this facility location.  INTERESTED PARTIES: No one other than the ED and the Respondent has expressed an interest in this matter.  COMMENTS RECEIVED: The Texas Register comment period expired on February 25, 2008. No comments were received.  CONTACTS AND MAILING LIST:  TCEQ Attorney/SEP Coordinator: Ms. Melissa Keller, SEP Coordinator, Enforcement Division, MC 219, (512) 239-1768  TCEQ Enforcement Coordinator: Mr. James Nolan, Enforcement Division, Enforcement Team 4, MC 149, (512) 239-6634; Mr. Bryan Sinclair, Enforcement Division, MC 219, (512) 239-2171  Respondent: Ms. Jessica Keiser, Environmental Health and Safety Manager, Targa North Texas LP, 1000 Louisiana Street, Suite 4300, Houston, Texas 77002  Mr. Clark White, Vice President, Targa North Texas LP, 1000 Louisiana Street, Suite 4300, Houston, Texas 77002  Respondent's Attorney: Not represented by counsel on this enforcement matter |                                                            |                                          |  |  |  |

# RESPONDENT NAME: Targa North Texas LP DOCKET NO.: 2007-1431-AIR-E

VIOLATION SUMMARY CHART: CORRECTIVE ACTIONS (1940) VIOLATION INFORMATION PENALTY CONSIDERATIONS TAKEN/REQUIRED : 6 and **Corrective Actions Taken:** Type of Investigation: Total Assessed: \$37,500 Complaint X Routine The Executive Director recognizes that the Total Deferred: \$0 Respondent has implemented the Enforcement Follow-up \_\_Expedited Settlement Records Review following corrective measures at the Site: Financial Inability to Pay a. On April 17, 2007, the flare connected Date(s) of Complaints Relating to this to compressor CM-4 was repaired; SEP Conditional Offset: \$18,750 Case: None b. On April 10, 2007, the staff responsible Date of Investigation Relating to this Total Paid to General Revenue: \$18,750 for maintaining the Site received Case: July 26, 2007 additional training on procedures and Site Compliance History Classification requirements to prevent the reoccurrence Date of NOV/NOE Relating to this Case: X High \_\_ Average \_\_ Poor of same or similar events; and August 7, 2007 (NOE) **Person Compliance History Classification** c. As of April 10, 2007, the Respondent Background Facts: This was a routine \_\_ High \_\_X Average \_\_ Poor now requires technicians to visit the Site investigation. daily to verify proper operation of the Site Major Source: X Yes No and its pollution abatement equipment. AIR Applicable Penalty Policy: September 2002 **Ordering Provisions:** Failed to keep emission capture and abatement equipment in good working **Findings Orders Justification:** The Order will require the Respondent to order, functioning properly during normal Environmental receptors have been exposed to implement and complete a Supplemental operations, and operating within pollutants which exceed levels that are Environmental Project (SEP). (See SEP authorized emission limitations [30 Tex. protective. Attachment A) ADMIN. CODE §§ 101.221(a) and 106.4(c), and Tex. Health & Safety Code §

Additional ID No(s).: YB0045Q

382.085(b)].

# Attachment A Docket Number: 2007-1431-AIR-E

#### SUPPLEMENTAL ENVIRONMENTAL PROJECT

**Respondent:** 

Targa North Texas LP

**Payable Penalty Amount:** 

Thirty-Seven Thousand Five Hundred Dollars (\$37,500)

**SEP Amount:** 

Eighteen Thousand Seven Hundred Fifty Dollars (\$18,750)

**Type of SEP:** 

Pre-approved

**Third-Party Recipient:** 

Texas Association of Resource Conservation and Development

Areas, Inc. ("RC&D")- Wastewater Treatment Assistance

**Location of SEP:** 

**Young County** 

The Texas Commission on Environmental Quality ("TCEQ") agrees to offset a portion of the administrative Penalty Amount assessed in this Agreed Order for the Respondent to contribute to a Supplemental Environmental Project ("SEP"). The offset is equal to the SEP Amount set forth above and is conditioned upon completion of the project in accordance with the terms of this Attachment A.

## 1. Project Description

#### A. Project

The Respondent shall contribute to the Third-Party Recipient pursuant to the agreement between the Third-Party Recipient and the TCEQ. Specifically, the contribution will be used to provide low income rural homeowners with assistance to enable the repair or replacement of their failing on-site wastewater systems. SEP monies will be used to pay for the labor and materials costs related to repairing or replacing the failing systems. The recipients will not be charged for the cost of replacing or repairing the failing systems.

The Respondent certifies that there is no prior commitment to do this project and that it is being performed solely in an effort to settle this enforcement action.

#### B. Environmental Benefit

This SEP will provide a discernible environmental benefit by protecting water sources for drinking, recreation, and wildlife from contamination from failing treatment systems

#### C. Minimum Expenditure

The Respondent shall contribute at least the SEP Amount to the Third-Party Recipient and comply with all other provisions of this SEP.

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#### 2. Performance Schedule

Within 30 days after the effective date of this Agreed Order, the Respondent must contribute the SEP Amount to the Third-Party Recipient. The Respondent shall mail the contribution, with a copy of the Agreed Order, to:

Texas Association of Resource Conservation and Development Areas, Inc. 1716 Briarcrest Drive, Suite 510 Bryan, Texas 77802-2700

#### 3. Records and Reporting

Concurrent with the payment of the SEP Amount, the Respondent shall provide the TCEQ SEP Coordinator with a copy of the check and transmittal letter indicating full payment of the SEP Amount to the Third-Party Recipient. The Respondent shall mail a copy of the check and transmittal letter to:

Enforcement Division Attention: SEP Coordinator, MC 219 Texas Commission on Environmental Quality P.O. Box 13087 Austin, Texas 78711-3087

### 4. Failure to Fully Perform

If the Respondent does not perform its obligations under this SEP in any way, including full payment of the SEP Amount and submittal of the required reporting described in Section 3 above, the Executive Director may require immediate payment of all or part of the SEP Amount.

The check for any amount due shall be made out to "Texas Commission on Environmental Quality" and mailed to:

Texas Commission on Environmental Quality Financial Administration Division, Revenues Attention: Cashier, MC 214 P.O. Box 13088 Austin, Texas 78711-3088

The Respondent shall also mail a copy of the check to the TCEQ SEP Coordinator at the address in Section 3 above.

#### 5. Publicity

Any public statements concerning this SEP made by or on behalf of the Respondent must include a clear statement that the project was performed as part of the settlement of an enforcement action brought by the TCEQ. Such statements include advertising, public relations, and press releases.

Targa North Texas LP Agreed Order – Attachment A

# 6. Clean Texas Program

The Respondent shall not include this SEP in any application made to TCEQ under the "Clean Texas" (or any successor) program(s). Similarly, the Respondent may not seek recognition for this contribution in any other state or federal regulatory program.

# 7. Other SEPs by TCEQ or Other Agencies

The SEP identified in this Agreed Order has not been, and shall not be, included as an SEP for the Respondent under any other Agreed Order negotiated with the TCEQ or any other agency of the state or federal government.

| DATES Assigned 14-Aug-2007 PCW 11-Sep-2007 Screening 5-Sep-2007 EPA Due  RESPONDENT/FACILITY INFORMATION Respondent Targa North Texas LP Reg. Ent. Ref. No. RN102553955 Facility/Site Region 3-Abilene Major/Minor Source Major  CASE INFORMATION Enf./Case ID No. 34613 Docket No. 2007-1431-AIR-E Media Program(s) Air Multi-Media Admin. Penalty \$ Limit Minimum \$0 Maximum \$10,000  Penalty Calculation Section  TOTAL BASE PENALTY (Sum of violation base penalties)  ADJUSTMENTS (+/-) TO SUBTOTAL 1 Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage. Compliance History 0% Enhancement Subtotals 2, 3, & 7  Notes  No adjustment due to average performer classification. |                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| RESPONDENT/FACILITY INFORMATION Respondent Respondent Reg. Ent. Ref. No. Facility/Site Region  CASE INFORMATION  Enf./Case ID No. Media Program(s) Multi-Media Admin. Penalty \$ Limit Minimum  Penalty Calculation Section  TOTAL BASE PENALTY (Sum of violation base penalties)  ADJUSTMENTS (+/-) TO SUBTOTAL 1 Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History  PAM Marion  Subtotals 2, 3, & 7                                                                                                                                                                                                                                                            |                                         |
| Respondent Reg. Ent. Ref. No. RN102553955 Facility/Site Region 3-Abilene Major/Minor Source Major  CASE INFORMATION Enf./Case ID No. 34613 Docket No. 2007-1431-AIR-E Media Program(s) Air Multi-Media Admin. Penalty \$ Limit Minimum \$0 Maximum \$10,000  Penalty Calculation Section  TOTAL BASE PENALTY (Sum of violation base penalties)  Subtotal 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage. Compliance History 0% Enhancement Subtotals 2, 3, & 7                                                                                                                                                                                                                               |                                         |
| Reg. Ent. Ref. No. RN102553955 Facility/Site Region 3-Abilene Major/Minor Source Major  CASE INFORMATION  Enf./Case ID No. 34613                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                         |
| CASE INFORMATION  Enf./Case ID No. 34613 Docket No. 2007-1431-AIR-E Media Program(s) Major/Minor Source Major  No. of Violations 1 Order Type Findings James Nolan Enf. Coordinator Benf. Coordinator Ec's Team EnforcementTeam 4  Penalty \$ Limit Minimum \$0 Maximum \$10,000  Penalty Calculation Section  TOTAL BASE PENALTY (Sum of violation base penalties)  Subtotal 1  Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage. Compliance History 0% Enhancement Subtotals 2, 3, & 7                                                                                                                                                                                             | *************************************** |
| Enf./Case ID No. 34613 Docket No. 2007-1431-AIR-E Media Program(s) Air Multi-Media Admin. Penalty \$ Limit Minimum \$0 Maximum \$10,000  Penalty Calculation Section  TOTAL BASE PENALTY (Sum of violation base penalties)  Subtotal 1  Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History  Order Type Enf. Coordinator James Nolan EnforcementTeam 4  Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History  O'' Enhancement Subtotals 2, 3, & 7                                                                                                                                        |                                         |
| Enf./Case ID No. 34613 Docket No. 2007-1431-AIR-E Media Program(s) Air Multi-Media Admin. Penalty \$ Limit Minimum \$0 Maximum \$10,000  Penalty Calculation Section  TOTAL BASE PENALTY (Sum of violation base penalties)  Subtotal 1  Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History  Order Type Enf. Coordinator EnforcementTeam 4  Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History  O'M Enhancement Subtotals 2, 3, & 7                                                                                                                                                    |                                         |
| Media Program(s) Multi-Media Admin. Penalty \$ Limit Minimum \$0 Maximum \$10,000  Penalty Calculation Section  TOTAL BASE PENALTY (Sum of violation base penalties)  ADJUSTMENTS (+/-) TO SUBTOTAL 1 Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History  Difference Dames Nolan Ec's Team EnforcementTeam 4  Subtotal 1  Subtotal 2  Subtotal 1                                                                                                                                                                                                                                                                                                                  |                                         |
| Multi-Media   EC's Team   EnforcementTeam 4   Admin. Penalty \$ Limit Minimum   \$0   Maximum   \$10,000    Penalty Calculation Section  TOTAL BASE PENALTY (Sum of violation base penalties)   Subtotal 1    Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History   0% Enhancement   Subtotals 2, 3, & 7                                                                                                                                                                                                                                                                                                                                                           |                                         |
| Admin. Penalty \$ Limit Minimum \$0 Maximum \$10,000  Penalty Calculation Section  TOTAL BASE PENALTY (Sum of violation base penalties) Subtotal 1  ADJUSTMENTS (+/-) TO SUBTOTAL 1  Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History 0% Enhancement Subtotals 2, 3, & 7                                                                                                                                                                                                                                                                                                                                                                                        | *************************************** |
| TOTAL BASE PENALTY (Sum of violation base penalties)  ADJUSTMENTS (+/-) TO SUBTOTAL 1  Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History  0% Enhancement  Subtotals 2, 3, & 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                         |
| TOTAL BASE PENALTY (Sum of violation base penalties)  ADJUSTMENTS (+/-) TO SUBTOTAL 1  Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History  0% Enhancement  Subtotals 2, 3, & 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                         |
| ADJUSTMENTS (+/-) TO SUBTOTAL 1 Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the indicated percentage.  Compliance History 0% Enhancement Subtotals 2, 3, & 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | \$50,000                                |
| Subtotals 2-7 are obtained by multiplying the Total Base Penalty (Subtotal 1) by the Indicated percentage.  Compliance History  0% Enhancement  Subtotals 2, 3, & 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                         |
| Compliance History 0% Enhancement Subtotals 2, 3, & 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | \$0                                     |
| Notes No adjustment due to average performer classification.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                         |
| Culpability No 0% Enhancement Subtotal 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$0                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                         |
| Notes The Respondent does not meet the culpability criteria.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                         |
| Good Faith Effort to Comply 25% Reduction Subtotal 5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | \$12,500                                |
| Before NOV NOV to EDPRP/Settlement Offer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                         |
| Extraordinary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                         |
| Ordinary X N/A (mark with x)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                         |
| Notes The Respondent returned to compliance by 47772007.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                         |
| 0% Enhancement* Subtotal 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | \$0                                     |
| Total EB Amounts \$3 *Capped at the Total EB \$ Amount                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                         |
| Approx. Cost of Compliance \$1,550                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                         |
| SUM OF SUBTOTALS 1-7 Final Subtotal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | \$37,500                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | \$0                                     |
| OTHER FACTORS AS JUSTICE MAY REQUIRE  Reduces or enhances the Final Subtotal by the indicated percentage. (Enter number only; e.g30 for -30%.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         |
| Reduces of emarices the Final Subdual by the indicated personage. [Circle Harms 1979]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         |
| Notes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         |
| Final Penalty Amount                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | \$37,500                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                         |
| STATUTORY LIMIT ADJUSTMENT Final Assessed Penalty                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | \$37,500                                |
| DEEEDRAI 0% Reduction Adjustment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$0                                     |
| Reduction Adjustment Reduction Percentage (Enter number only; e.g. 20 for 20% reduction.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                         |
| Notes No deferral is recommended for Findings Orders.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         |

PAYABLE PENALTY

\$37,500

|                                | se ID No. 34613<br>ence No. RN102553955                                                                                                                                                                                                | <b>P</b> (                | CW Revision | June 2 |
|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------------|--------|
| Media                          | [Statute] Air<br>ordinator James Nolan                                                                                                                                                                                                 |                           |             |        |
|                                | Compliance History Worksheet                                                                                                                                                                                                           |                           |             |        |
| npliance History<br>Component  | / Site Enhancement (Subtotal 2) Number of                                                                                                                                                                                              | Enter Number Here         | Adjust.     |        |
|                                | Written NOVs with same or similar violations as those in the current enforcement action (number of NOVs meeting criteria)                                                                                                              | 0                         | 0%          | ] .,   |
|                                | Other written NOVs                                                                                                                                                                                                                     | 0                         | 0%          | ]      |
|                                | Any agreed final enforcement orders containing a denial of liability (number of orders meeting criteria)                                                                                                                               | U <sub>1,111,11</sub>     | 0%          |        |
| Orders                         | Any adjudicated final enforcement orders, agreed final enforcement orders without a denial of liability, or default orders of this state or the federal government, or any final prohibitory emergency orders issued by the commission |                           | 0%          |        |
| Judgments and Consent          | Any non-adjudicated final court judgments or consent decrees containing a denial of liability of this state or the federal government (number of judgements or consent decrees meeting criteria)                                       | 0                         | 0%          | 4      |
| Decrees                        | Any adjudicated final court judgments and default judgments, or non-adjudicated final court judgments or consent decrees without a denial of liability, of this state or the federal government                                        |                           | 0%          |        |
|                                | Any criminal convictions of this state or the federal government (number of counts)                                                                                                                                                    | 0                         | 0%          |        |
| Emissions                      | Chronic excessive emissions events (number of events)  Letters notifying the executive director of an intended audit conducted under the Texas                                                                                         | 0                         | 0%          | -      |
| Audits                         | Environmental, Health, and Safety Audit Privilege Act, 74th Legislature, 1995 (number of audits for which notices were submitted)                                                                                                      |                           | 0%          |        |
|                                | Disclosures of violations under the Texas Environmental, Health, and Safety Audit Privilege Act, 74th Legislature, 1995 (number of audits for which violations were disclosed)                                                         | U                         | 0%          |        |
|                                | Environmental management systems in place for one year or more                                                                                                                                                                         | se Enter Yes or No<br>No  | 0%          | 1      |
|                                | Voluntary on-site compliance assessments conducted by the executive director under a special assistance program                                                                                                                        |                           | 0%          | -      |
| Other                          | Participation in a voluntary pollution reduction program                                                                                                                                                                               | No                        | 0%          | 1      |
|                                | Early compliance with, or offer of a product that meets future state or federal government environmental requirements                                                                                                                  | Automotive and the second | 0%          |        |
|                                | Adjustment P                                                                                                                                                                                                                           | ercentage (Su             | ıbtotal 2)  |        |
| eat Violator (Su               | btotal 3)                                                                                                                                                                                                                              |                           |             |        |
| No                             | Adjustment P                                                                                                                                                                                                                           | ercentage (Su             | btotal 3)   |        |
| npliance History               | Person Classification (Subtotal 7)                                                                                                                                                                                                     |                           |             |        |
| Average Pe                     | erformer Adjustment P                                                                                                                                                                                                                  | ercentage (Su             | btotal 7)   |        |
| npliance History               | Summary                                                                                                                                                                                                                                |                           |             |        |
| Compliance<br>History<br>Notes | No adjustment due to average performer classification.                                                                                                                                                                                 |                           | ,           |        |

| Screening Date                             | 5-Sep-2007                                                                                                                           | Docket N                                                                                                                          | <b>No.</b> 2007-1431-AIR-E                                                                                                                                                                                                                              | PCW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                            | Targa North Texas LP                                                                                                                 |                                                                                                                                   | •                                                                                                                                                                                                                                                       | vision 2 (September 2002)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Case ID No.                                |                                                                                                                                      |                                                                                                                                   | PC                                                                                                                                                                                                                                                      | W Revision June 26, 2007                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Reg. Ent. Reference No.<br>Media [Statute] |                                                                                                                                      | •                                                                                                                                 |                                                                                                                                                                                                                                                         | delication of the second of th |
| Enf. Coordinator<br>Violation Number       |                                                                                                                                      |                                                                                                                                   |                                                                                                                                                                                                                                                         | Anna Anna Anna Anna Anna Anna Anna Anna                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Rule Cite(s)                               |                                                                                                                                      | § 101.221(a) and 106.4(c<br>382.085(b)                                                                                            | ), and Texas Health & Safety Code §                                                                                                                                                                                                                     | And an analysis of the second  |
| Violation Description                      | functioning properly durir<br>limitations. Specifically,<br>compressor CM-4 failed<br>of propane, 40,624 lbs<br>minute period. Since | ng normal operations, and from April 5, 2007 through to ignite, resulting in the of butane, and 12,482 lbe the emission event was | at equipment in good working order, doperating within authorized emission the April 10, 2007 the flare attached to unauthorized emission of 90,462 lbs sof pentane over a 120 hour and 30 avoidable, the demonstrations for ode § 101.222 were not met. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                            |                                                                                                                                      |                                                                                                                                   | Base Penalty                                                                                                                                                                                                                                            | \$10,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| >> Environmental, Property a               | and Human Health M                                                                                                                   | latrix                                                                                                                            |                                                                                                                                                                                                                                                         | ***************************************                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Release                                    | Harm                                                                                                                                 |                                                                                                                                   |                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| OR Actual                                  |                                                                                                                                      | i Million                                                                                                                         |                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Potential                                  |                                                                                                                                      |                                                                                                                                   | Percent 100%                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| >>Programmatic Matrix                      |                                                                                                                                      |                                                                                                                                   |                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Falsification                              | Major Moderate                                                                                                                       | e Minor                                                                                                                           | Percent 0%                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                            |                                                                                                                                      |                                                                                                                                   |                                                                                                                                                                                                                                                         | " Non-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Matrix<br>Notes Human he                   | ealth or the environment h<br>tective of human health o                                                                              | nas been exposed to pollo<br>or environmental receptor                                                                            | utants which exceed levels that are s as a result of the violation.                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                            |                                                                                                                                      |                                                                                                                                   | Adjustment \$0                                                                                                                                                                                                                                          | e mange.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                            |                                                                                                                                      |                                                                                                                                   | •                                                                                                                                                                                                                                                       | \$10,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                            |                                                                                                                                      |                                                                                                                                   |                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Violation Events                           |                                                                                                                                      |                                                                                                                                   |                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Number of Vi                               | iolation Events 5                                                                                                                    | 5                                                                                                                                 | Number of violation days                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                            | daily x                                                                                                                              |                                                                                                                                   |                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| mark only one<br>with an x                 | monthly quarterly semiannual                                                                                                         |                                                                                                                                   | Violation Base Penalty                                                                                                                                                                                                                                  | \$50,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                            | annual single event                                                                                                                  |                                                                                                                                   |                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                            |                                                                                                                                      |                                                                                                                                   |                                                                                                                                                                                                                                                         | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                            | Five                                                                                                                                 | daily events are recomme                                                                                                          | ended.                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Economic Benefit (EB) for the              | his violation                                                                                                                        |                                                                                                                                   | Statutory Limit Test                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 800000000000000000000000000000000000000    | ed EB Amount                                                                                                                         | \$3                                                                                                                               | Violation Final Penalty Total                                                                                                                                                                                                                           | \$37,500                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                            |                                                                                                                                      | This violation Final A                                                                                                            | ssessed Penalty (adjusted for limits)                                                                                                                                                                                                                   | \$37,500                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
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| Respondent                                | Targa North Tex                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | as LP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                              |                |                                         |                                               |                                        |
| Case ID No.                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |                | 1                                       |                                               |                                        |
| Reg. Ent. Reference No.                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |                |                                         | 37                                            | in the second second                   |
| Media                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |                |                                         |                                               | Years of                               |
| Violation No.                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |                |                                         | Percent Interest                              | Depreciation                           |
| violation (co.                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |                |                                         |                                               |                                        |
|                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | B-4-B-1-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | F: 15.1                      | .,             |                                         | 5.0                                           | 15                                     |
|                                           | Item Cost                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Date Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Final Date                   | Yrs            | Interest Saved                          | Onetime Costs                                 | EB Amount                              |
| Item Description                          | No commas or \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |                |                                         |                                               |                                        |
|                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |                |                                         |                                               |                                        |
| Delayed Costs                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              | <del>,</del>   |                                         |                                               |                                        |
| Equipment                                 | 1000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              | . 0,0          | \$0                                     | ₩ \$0                                         | \$0                                    |
| Buildings                                 | 9.50                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              | 0,0            | \$0                                     | \$0                                           | \$0                                    |
| Other (as needed)                         | 64.400                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 5 A 0007                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 47.4 0007                    | 0,0            | \$0                                     | \$0                                           | \$0                                    |
| Engineering/construction                  | \$1,100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 5-Apr-2007                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 17-Apr-2007                  | 0.0            | \$0                                     | \$2                                           | \$3                                    |
| Land                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              | 0,0            | \$0                                     | n/a                                           | ************************************** |
| Record Keeping System                     | 0.450                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | F A = + 0007                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 40.4*******                  | 0.0            | \$0                                     | n/a                                           | \$0                                    |
| Training/Sampling<br>Remediation/Disposal | \$450                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 5-Apr-2007                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 10-Apr-2007                  | 0.0            | \$0<br>\$0                              | n/a                                           | \$0                                    |
| Remediation/Disposal Permit Costs         | A CONTRACTOR OF A CONTRACTOR O | NAME OF TAXABLE PARTY O |                              | 0,0            | \$0<br>\$0                              | n/a<br>n/a                                    | \$0<br>\$0                             |
| Other (as needed)                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              | 0.0            | \$0<br>\$0                              | n/a<br>n/a                                    | \$0<br>\$0                             |
| Other (as needed)                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u> </u>                     | <u>  0.0  </u> | Ψυ                                      | i iie                                         | Ψυ                                     |
| Notes for DELAYED costs                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              |                |                                         | d proper manageme<br>late of flare failure, F |                                        |
| Hoto for BEEN ED Cotto                    | oricate the pre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | por operation of the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                              | of comp        |                                         | ate of hare failure, f                        | illar date 13 the                      |
| Avoided Costs                             | ANN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | UALIZE [1] avoid                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ed costs before e            | ntering        | item (except for                        | one-time avoided o                            | osts)                                  |
| Disposal                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              | 0,0            | · \$0                                   | \$0                                           | \$0                                    |
| Personnel                                 | NO. 307-100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              | 0.0            | \$0                                     | \$0                                           | \$0                                    |
| Inspection/Reporting/Sampling             | 333                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              | 0.0            | \$0                                     | \$0                                           | \$0                                    |
| Supplies/equipment                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              | 0.0            | \$0                                     | \$0                                           | \$0                                    |
| Financial Assurance [2]                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 127                          | 0,0            | \$0                                     | \$0                                           | \$0                                    |
| ONE-TIME avoided costs [3]                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                              | 0.0            | \$0                                     | \$0                                           | \$0                                    |
| Other (as needed)                         | 0.000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 50 x 4 x 20                  | 0.0            | \$0                                     | \$0                                           | \$0                                    |
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| Ц                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 11.                          |                |                                         |                                               |                                        |
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# **Compliance History**

Rating: 3.54 Targa North Texas LP Classification: AVERAGE Customer/Respondent/Owner-Operator: CN603034844 Site Rating: 0.00 RN102553955 MILLERS BEND COMPRESSOR Classification: HIGH Regulated Entity: STATION ID Number(s): YB0045Q AIR NEW SOURCE PERMITS ACCOUNT NUMBER AIR NEW SOURCE PERMITS REGISTRATION 20232 AIR NEW SOURCE PERMITS REGISTRATION 70012 REGISTRATION 73916 AIR NEW SOURCE PERMITS AIR NEW SOURCE PERMITS AFS NUM 4850300021 Location: 0.5 mile west of Miller Bend Road, 5.3 miles south of Highway 380 in Young County, Texas REGION 03 - ABILENE Rating Date: September 01 07 Repeat Violator: TCEQ Region: Date Compliance History Prepared: September 17, 2007 Agency Decision Requiring Compliance History: Enforcement September 17, 2002 to September 17, 2007 Compliance Period: TCEQ Staff Member to Contact for Additional Information Regarding this Compliance History (512) 239-6634 Name: James Nolan Phone: Site Compliance History Components 1. Has the site been in existence and/or operation for the full five year compliance period? 2. Has there been a (known) change in ownership of the site during the compliance period? Targa North Texas LP 3. If Yes, who is the current owner? 4. if Yes, who was/were the prior owner(s)? Targa Midstream Services Limited Partnership 5. When did the change(s) in ownership occur? 01/20/2006 Components (Multimedia) for the Site: Final Enforcement Orders, court judgements, and consent decrees of the state of Texas and the federal government. Any criminal convictions of the state of Texas and the federal government. В. N/A C. Chronic excessive emissions events. The approval dates of investigations. (CCEDS Inv. Track. No.) D. 1 08/29/2003 (133855) 2 04/06/2004 (262295) 3 05/28/2004 (273534)4 08/11/2004 (284934)5 02/24/2006 6 07/28/2006 (486393) 7 08/07/2007 (570068) Written notices of violations (NOV). (CCEDS Inv. Track. No.) E. N/A Environmental audits. N/A Type of environmental management systems (EMSs). Voluntary on-site compliance assessment dates. Н. N/A Participation in a voluntary pollution reduction program. N/A Early compliance. N/A Sites Outside of Texas N/A

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



| IN THE MATTER OF AN  | § | BEFORE THE            |
|----------------------|---|-----------------------|
| ENFORCEMENT ACTION   | § |                       |
| CONCERNING           | § | TEXAS COMMISSION ON   |
| TARGA NORTH TEXAS LP | § |                       |
| RN102553955          | § | ENVIRONMENTAL QUALITY |

### AGREED ORDER DOCKET NO. 2007-1431-AIR-E

| At its                        | agenda, the Texas Commission on Environmental Quality ("the              |
|-------------------------------|--------------------------------------------------------------------------|
| Commission" or "TCEQ") co     | onsidered this agreement of the parties, resolving an enforcement action |
| regarding Targa North Texas   | LP ("the Respondent") under the authority of TEX. HEALTH & SAFETY        |
| CODE ch. 382 and TEX. WA      | ATER CODE ch. 7. The Executive Director of the TCEQ, through the         |
| Enforcement Division, and the | Respondent presented this agreement to the Commission.                   |

The Respondent understands that it has certain procedural rights at certain points in the enforcement process, including, but not limited to, the right to formal notice of violations, notice of an evidentiary hearing, the right to an evidentiary hearing, and a right to appeal. By entering into this Agreed Order, the Respondent agrees to waive all notice and procedural rights.

It is further understood and agreed that this Order represents the complete and fully-integrated settlement of the parties. The provisions of this Agreed Order are deemed severable and, if a court of competent jurisdiction or other appropriate authority deems any provision of this Agreed Order unenforceable, the remaining provisions shall be valid and enforceable. The duties and responsibilities imposed by this Agreed Order are binding upon the Respondent.

The Commission makes the following Findings of Fact and Conclusions of Law:

### I. FINDINGS OF FACT

1. The Respondent owns and operates a natural gas compressor station located 0.5 mile west of Miller Bend Road, 5.3 miles south of Highway 380 in Young County, Texas (the "Site").

- 2. The Site consists of one or more sources as defined in TEX. HEALTH & SAFETY CODE § 382.003(12).
- During an investigation on July 26, 2007, TCEQ staff documented that the Respondent failed to properly operate emission control equipment during normal operations, which resulted in an emission event. Specifically, from April 5, 2007 through April 10, 2007 the flare attached to compressor CM-4 failed to ignite, resulting in the unauthorized emission of 90,462 pounds ("lbs") of propane, 40,624 lbs of butane, and 12,482 lbs of pentane over a 120 hour and 30 minute period. Since the emission event was avoidable, the demonstrations for affirmative defense in 30 Tex. Admin Code § 101.222 were not met.
- 4. The Respondent received notice of the violations on August 12, 2007.
- 5. The Executive Director recognizes that the Respondent has implemented the following corrective measures at the Site:
  - a. On April 17, 2007, the flare connected to compressor CM-4 was repaired;
  - b. On April 10, 2007, the staff responsible for maintaining the Site received additional training on procedures and requirements to prevent the reoccurrence of same or similar events; and
  - c. As of April 10, 2007, the Respondent now requires technicians to visit the Site daily to verify proper operation of the Site and its pollution abatement equipment.

#### II. CONCLUSIONS OF LAW

- 1. The Respondent is subject to the jurisdiction of the TCEQ pursuant to TEX. HEALTH & SAFETY CODE ch. 382 and TEX. WATER CODE ch. 7 and the rules of the Commission.
- 2. As evidenced by Findings of Fact No. 3, the Respondent failed to keep emission capture and abatement equipment in good working order, functioning properly during normal operations, and operating within authorized emission limitations, in violation of 30 Tex. ADMIN. CODE §§ 101.221(a) and 106.4(c), and Tex. Health & Safety Code § 382.085(b).
- 3. Pursuant to Tex. Water Code § 7.051, the Commission has the authority to assess an administrative penalty against the Respondent for violations of the Texas Water Code and the Texas Health and Safety Code within the Commission's jurisdiction; for violations of rules adopted under such statutes; or for violations of orders or permits issued under such statutes.
- 4. An administrative penalty in the amount of Thirty-Seven Thousand Five Hundred Dollars (\$37,500) is justified by the facts recited in this Agreed Order, and considered in light of the factors set forth in Tex. Water Code § 7.053. The Respondent has paid Eighteen Thousand Seven Hundred Fifty Dollars (\$18,750) of the administrative penalty and Eighteen Thousand Seven Hundred Fifty Dollars (\$18,750) shall be conditionally offset by the Respondent's completion of a Supplemental Environmental Project.

#### III. ORDERING PROVISIONS

NOW, THEREFORE, THE TEXAS COMMISSION ON ENVIRONMENTAL QUALITY ORDERS that:

1. The Respondent is assessed an administrative penalty in the amount of Thirty-Seven Thousand Five Hundred Dollars (\$37,500) as set forth in Section II, Paragraph 4 above, for violations of TCEQ rules and state statutes. The payment of this administrative penalty and the Respondent's compliance with all the terms and conditions set forth in this Agreed Order completely resolve the violations set forth by this Agreed Order in this action. However, the Commission shall not be constrained in any manner from requiring corrective actions or penalties for other violations that are not raised here. Administrative penalty payments shall be made payable to "TCEQ" and shall be sent with the notation "Re: Targa North Texas LP, Docket No. 2007-1431-AIR-E" to:

Financial Administration Division, Revenues Section Attention: Cashier's Office, MC 214 Texas Commission on Environmental Quality P.O. Box 13088 Austin, Texas 78711-3088

- 2. The Respondent shall implement and complete a Supplemental Environmental Project ("SEP") in accordance with Tex. Water Code § 7.067. As set forth in Section II, Paragraph 4, Eighteen Thousand Seven Hundred Fifty Dollars (\$18,750) of the assessed administrative penalty shall be offset with the condition that the Respondent implement the SEP defined in Attachment A, incorporated herein by reference. The Respondent's obligation to pay the conditionally offset portion of the administrative penalty assessed shall be discharged upon final completion of all provisions of the SEP agreement.
- 3. The provisions of this Agreed Order shall apply to and be binding upon the Respondent. The Respondent is ordered to give notice of the Agreed Order to personnel who maintain day-to-day control over the Site operations referenced in this Agreed Order.
- 4. If the Respondent fails to comply with any of the Ordering Provisions in this Agreed Order within the prescribed schedules, and that failure is caused solely by an act of God, war, strike, riot, or other catastrophe, the Respondent's failure to comply is not a violation of this Agreed Order. The Respondent shall have the burden of establishing to the Executive Director's satisfaction that such an event has occurred. The Respondent shall notify the Executive Director within seven days after the Respondent becomes aware of a delaying event and shall take all reasonable measures to mitigate and minimize any delay.
- 5. The Executive Director may grant an extension of any deadline in this Agreed Order or in any plan, report, or other document submitted pursuant to this Agreed Order, upon a written and substantiated showing of good cause. All requests for extensions by the Respondent shall be made in writing to the Executive Director. Extensions are not effective until the Respondent receives written approval from the Executive Director. The determination of what constitutes good cause rests solely with the Executive Director.

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- 6. The Executive Director may refer this matter to the Office of the Attorney General of the State of Texas ("OAG") for further enforcement proceedings without notice to the Respondent if the Executive Director determines that the Respondent has not complied with one or more of the terms or conditions in this Agreed Order.
- 7. This Agreed Order shall terminate five years from its effective date or upon compliance with all the terms and conditions set forth in this Agreed Order, whichever is later.
- 8. This Agreed Order, issued by the Commission, shall not be admissible against the Respondent in a civil proceeding, unless the proceeding is brought by the OAG to: (1) enforce the terms of this Agreed Order; or (2) pursue violations of a statute within the Commission's jurisdiction, or of a rule adopted or an order or permit issued by the Commission under such a statute.
- 9. This agreement may be executed in multiple counterparts, which together shall constitute a single original instrument. Any executed signature page to this Agreement may be transmitted by facsimile transmission to the other parties, which shall constitute an original signature for all purposes.
- 10. The Chief Clerk shall provide a copy of this Agreed Order to each of the parties. By law, the effective date of this Agreed Order is the third day after the mailing date, as provided by 30 Tex. ADMIN. CODE § 70.10(b) and Tex. GOV'T CODE § 2001.142.

Targa North Texas LP DOCKET NO. 2007-1431-AIR-E Page 5

# SIGNATURE PAGE

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

| For the Commission                                                                                                                                                       |                                                                                                                                                                                                                                                                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| For the Executive Director                                                                                                                                               | $\frac{3/5/2009}{\text{Date}}$                                                                                                                                                                                                                                    |
| I, the undersigned, have read and understand the Texas LP. I am authorized to agree to the attached                                                                      | attached Agreed Order in the matter of Targa North<br>Agreed Order on behalf of Targa North Texas LP, and<br>I further acknowledge that the TCEQ, in accepting                                                                                                    |
| rights, including, but not limited to, the right to<br>Order, notice of an evidentiary hearing, the right                                                                | der, Targa North Texas LP waives certain procedural formal notice of violations addressed by this Agreed to an evidentiary hearing, and the right to appeal. I an evidentiary hearing. This Agreed Order constitutes e violations set forth in this Agreed Order. |
| <ul> <li>timely pay the penalty amount, may result in:</li> <li>A negative impact on compliance history;</li> <li>Greater scrutiny of any permit applications</li> </ul> |                                                                                                                                                                                                                                                                   |
| <ul> <li>penalties, and/or attorney fees, or to a colle</li> <li>Increased penalties in any future enforcement</li> </ul>                                                |                                                                                                                                                                                                                                                                   |
| • TCEQ seeking other relief as authorized by In addition, any falsification of any compliance doc                                                                        | law.                                                                                                                                                                                                                                                              |
| Clark White                                                                                                                                                              | 12/3/07<br>Date                                                                                                                                                                                                                                                   |
| CLARK White  Name (Printed or typed)  Authorized Representative of  Targa North Texas LP                                                                                 | VICE- PRESIDENT Title                                                                                                                                                                                                                                             |

Instructions: Send the original, signed Agreed Order with penalty payment to the Financial Administration Division, Revenues Section at the address in Section IV, Paragraph 1 of this Agreed Order.

# Attachment A Docket Number: 2007-1431-AIR-E

#### SUPPLEMENTAL ENVIRONMENTAL PROJECT

Respondent:

Targa North Texas LP

Payable Penalty Amount:

Thirty-Seven Thousand Five Hundred Dollars (\$37,500)

**SEP Amount:** 

Eighteen Thousand Seven Hundred Fifty Dollars (\$18,750)

Type of SEP:

Pre-approved

Third-Party Recipient:

Texas Association of Resource Conservation and Development Areas, Inc. ("RC&D")- Wastewater Treatment Assistance

Young County

Location of SEP:

The Texas Commission on Environmental Quality ("TCEQ") agrees to offset a portion of the administrative Penalty Amount assessed in this Agreed Order for the Respondent to contribute to a Supplemental Environmental Project ("SEP"). The offset is equal to the SEP Amount set forth above and is conditioned upon completion of the project in accordance with the terms of this Attachment A.

## 1. Project Description

#### A. Project

The Respondent shall contribute to the Third-Party Recipient pursuant to the agreement between the Third-Party Recipient and the TCEQ. Specifically, the contribution will be used to provide low income rural homeowners with assistance to enable the repair or replacement of their failing on-site wastewater systems. SEP monies will be used to pay for the labor and materials costs related to repairing or replacing the failing systems. The recipients will not be charged for the cost of replacing or repairing the failing systems.

The Respondent certifies that there is no prior commitment to do this project and that it is being performed solely in an effort to settle this enforcement action.

#### B. Environmental Benefit

This SEP will provide a discernible environmental benefit by protecting water sources for drinking, recreation, and wildlife from contamination from failing treatment systems

## C. <u>Minimum Expenditure</u>

The Respondent shall contribute at least the SEP Amount to the Third-Party Recipient and comply with all other provisions of this SEP.

#### 2. Performance Schedule

Within 30 days after the effective date of this Agreed Order, the Respondent must contribute the SEP Amount to the Third-Party Recipient. The Respondent shall mail the contribution, with a copy of the Agreed Order, to:

Texas Association of Resource Conservation and Development Areas, Inc. 1716 Briarcrest Drive, Suite 510 Bryan, Texas 77802-2700

### 3. Records and Reporting

Concurrent with the payment of the SEP Amount, the Respondent shall provide the TCEQ SEP Coordinator with a copy of the check and transmittal letter indicating full payment of the SEP Amount to the Third-Party Recipient. The Respondent shall mail a copy of the check and transmittal letter to:

Enforcement Division Attention: SEP Coordinator, MC 219 Texas Commission on Environmental Quality P.O. Box 13087 Austin, Texas 78711-3087

#### 4. Failure to Fully Perform

If the Respondent does not perform its obligations under this SEP in any way, including full payment of the SEP Amount and submittal of the required reporting described in Section 3 above, the Executive Director may require immediate payment of all or part of the SEP Amount.

The check for any amount due shall be made out to "Texas Commission on Environmental Quality" and mailed to:

Texas Commission on Environmental Quality Financial Administration Division, Revenues Attention: Cashier, MC 214 P.O. Box 13088 Austin, Texas 78711-3088

The Respondent shall also mail a copy of the check to the TCEQ SEP Coordinator at the address in Section 3 above.

#### 5. Publicity

Any public statements concerning this SEP made by or on behalf of the Respondent must include a clear statement that the project was performed as part of the settlement of an enforcement action brought by the TCEQ. Such statements include advertising, public relations, and press releases.

Targa North Texas LP Agreed Order - Attachment A

# 6. Clean Texas Program

The Respondent shall not include this SEP in any application made to TCEQ under the "Clean Texas" (or any successor) program(s). Similarly, the Respondent may not seek recognition for this contribution in any other state or federal regulatory program.

# 7. Other SEPs by TCEQ or Other Agencies

The SEP identified in this Agreed Order has not been, and shall not be, included as an SEP for the Respondent under any other Agreed Order negotiated with the TCEQ or any other agency of the state or federal government.

